



Dr. William L. Roper will take the helm of the nation's top public health organization March 1. He says he expects some of his decisions will receive little applause. Among other things, he plans to work for a totally smoke-free America, lower infant mortality rates and reduced drug abuse.

PHOTOGRAPHY/ TOM SMART

New health chief expects some heat

■ **Controversy:** Roper will fight smoking, illnesses — and his opponents — at the CDC.

By JoAnn Jacobsen-Wells

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WASHINGTON — When Dr. William L. Roper says his goal is to "stop smoking entirely in America," expect the air to clear — and the heat to rise.

Also expect the soft-spoken White House adviser to stand firm.

Roper will be no stranger to controversy and opposition when he takes the helm March 1 of the national Centers for Disease Control — the world's pre-eminent public health organization.

"I am sure there are going to be some decisions I make at CDC that are not going to be applauded by everybody," Roper said in a recent Deseret News interview in his White House office. "I didn't take this job on — or any other job — to get applause. I took the job to try to do the right thing."

The CDC post is the latest of many prestigious posts for the 41-year-old physician/administrator, who succeeds Dr. James O. Mason at the Atlanta-based agency. Mason, former director of the Utah Department of Health, left the agency early last year to become assistant secretary of public health service in the Department of Health and Human Services.

Roper, too, was a former health officer of the Jefferson County Department of Health in Birmingham, Ala., before first serving at the White House from 1983-86, where as a special assistant to the president he formulated and directed the nation's health policies.

But one of his biggest challenges came in 1986 when he ran the Health Care Financing Administration, which administers Medicare and Medicaid. During his tenure at the agency, Roper an-

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for programs funded by the Division of Services to the Handicapped.

Both the governor's and the legislators' proposals are an item in the 1990 budget, advocates said. Clients spent two afternoons discussing needs that will not be met by the proposals.

According to analyst J. Winslow, the division serves 4,500 of the estimated 30,000 handicapped people. Programs include medical services, family support, day programs, supported employment and transportation.

He warned lawmakers that high technology and low provider reimbursement could endanger the existence of the programs. "We are putting added pressure on services."

Wolfgang brought her handicapped son, Radd, with her to the services like day treatment, respite and respite care that would keep her son in her home and save savings to the state.

Cost of family support, according to Sebastian Streiffel, USU, is \$2,500-4,000 a year, compared to more than \$20,000 for institutional care.

Thompson and her husband are to care for their two se-

verely, multiply handicapped children at home. But it's getting harder, she said.

Kristen, 9, still wears a diaper. The child has no fear and is also self-abusive. Jared, 2, has a feeding pump and Thompson said they are up all night comforting him. Feeding him even the smallest amount of baby food takes 45 minutes.

To manage, they work opposite shifts so one parent is always home. But they desperately need someone to provide respite.

Patrick Driscoll was in a nursing home. Now he has an apartment, and with help from Community Nursing, the Alternatives Program and his mother and neighbors, he manages. But he needs the independence that attendant care would give him. He is No. 2 on a waiting list.

Reye's syndrome left 8-year-old Brent Richardson with brain damage and multiple handicaps, according to his mother, Ann. After a long hospitalization, his family took him home.

They placed Brent in the Utah State Training School when a complicated pregnancy confined his mother to bed for several months.

Ann Richardson expressed the frustration of a number of parents when she told lawmakers, "Love doesn't do it all. There are times when we can't do any more as a family. Please help us."

Members of the committee are scheduled to take a tentative vote on the DSH budget Wednesday.

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"I don't know yet," he said, adding that the state may have to pass a law giving the county authority to enforce regulations.

Ray, Morris said not all of the wood-burning regulations are easy to enforce. For instance, enforcing a ban on the use of high-moisture wood and limb-cutting from March 1 to May 1 would require manpower and

proposal requiring that

non EPA-approved stoves be removed, replaced or not used upon sale of existing homes also could give the Clean Air Commission fits, Morris said. "This will be a hard thing to monitor even with manpower."

If the Clean Air Commission feels a proposal can't be adequately enforced, it likely will be eliminated. "We'd lose credibility (with the EPA) if we don't develop a good mechanism of enforcement," Morris said.

The commission also must grapple with ways of funding the manpower necessary for enforcement. A proposed fee levied against wood stoves and fireplaces that don't meet EPA standards already has met with public opposition.